



Complete and mail this form, together with ____ cable fees, to:

Assistant Commissioner for Patents Washington, D.C. 20231

<u></u>					
MAILING INSTRUCTIONS: This form should be used for transmitting through 4 should be completed where appropriate. All further correspondence patent, advance orders and notification of maintenance for correspondence address as indicated unless corrected below or direct specifying a new correspondence address; and/or (b) indicating a smaintenance fee notifications.	Note: The certificate of mailing below can only be used for domestic mailings of the Issue Fee Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing; must have its own certificate of mailing. Certificate of Mailing				
URRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) 1 hereby certify that this Issue Fee Transmittal is being deposite the Urited States Postal Service with sufficient postage for first mail in an envelope addressed to the Box Issue Fee address above the date indicated below. 1 hereby certify that this Issue Fee Transmittal is being deposite the Urited States Postal Service with sufficient postage for first mail in an envelope addressed to the Box Issue Fee address above the date indicated below.					
FALLS CHURCH VA 22040-0747	007 2 9 200		(Depositor's name) (Signature)		
÷	The same		(Date)		
APPLICATION NO. FILING DATE. T	OTAL CLAIMSOEMARK OFF	EXAMINER AND GROUP ART UNIT	DATE MAILED		
09/537,707 03/30/00 0	13 SHULMAN	, M	3744 07/27/01		
First Named Applicant SHIM,	35 USC 154(b) term ext. =	0 Days.		

TITLE OF INVENTION DE-HUMIDIFICATION SYSTEM OF UNDERGROUND STORAGE FACILITIES AND A METHO D FOR DE-HUMIDIFICATION THEREBY

	ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO:	APPLN.	TYPE	SMALL E	VTITY	FEE DUE	DATI	E DUE
	2 2632-0134F	062-093.	.000 J	67 l	JTILI	TY	YES .	POHU -	- 10	/29/01
Use of PTO form(s) and Customer Number are recommended, but not required. (1) the name attorneys or Change of Correspondence Address form the name of member a land the name of member a land the name.					names of ys or age me of a ir a regist names of	ting on the patent front page, list nes of up to 3 registered patent or agents OR, alternatively, (2) of a single firm (having as a registered attorney or agent) mes of up to 2 registered patent or agents. If no name is listed, no				
3.	ASSIGNEE NAME AND RESIDENCE PLEASE NOTE: Unless an assigne Inclusion of assignee data is only a the PTO or is being submitted unde filling an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY & STATE OF	CE DATA TO BE PRINTED ON the is identified below, no assignment propriets when an assignment ar separate cover. Completion HIMSSEN ESCO O OR COUNTRY) Seoul nee category indicated below (or other private group entity	N THE PATENT (pnee data will appe thas been previous of this form is NC O., LTD. KOREA (will not be printed government	print or type) ar on the pa usly submitt of a substitu	will be printed as the printed to be for the printed to be for the printed as the	The following of Patents and Issue Fee Advance Community DEPOSIT AC (ENCLOSE A MASSUE Fee Advance Community DEPOSIT AC (ENCLOSE A MASSUE Fee A Advance Community DEPOSIT AC (ENCLOSE A MASSUE Fee A Advance Community DEPOSIT AC (ENCLOSE A MASSUE Fee A Advance Community DEPOSIT AC (ENCLOSE A MASSUE FEE A Advance Community DEPOSIT AC (ENCLOSE A MASSUE FEE A M	fees are encorrected and count number of Count number of Count number of Count number of Count new feet and	clency in these fee MBER 02- OPY OF THIS FO	es should be ch	narged to:
NA OFFI	acceph A Kolasch OTE; The issue Fee will not be accept agent; or the assignee or other particular ademark Office. Nurden Hour Statement: This form epending on the needs of the individual occumplete this form should be selffice, Washington, D.C. 20231. D.DDRESS. SEND FEES AND THe atents, Washington D.C. 20231 inder the Paperwork Reduction Act information unless it displays a very complete the paperwork Reduction Act information unless it displays a very complete the paperwork Reduction Act information unless it displays a very complete the paperwork Reduction Act information unless it displays a very complete the paperwork Reduction Act information unless it displays a very complete the paperwork Reduction Act information unless it displays a very complete the paperwork Reduction Act information unless it displays a very complete the paperwork Reduction Act information unless it displays a very complete the paperwork Reduction Act information unless it displays a very complete the paperwork Reduction Act information unless it displays a very complete the paperwork Reduction Act information unless it displays a very complete the paperwork Reduction Act information unless it displays a very complete the paperwork Reduction Act information unless it displays a very complete the paperwork Reduction Act information unless it displays a very complete the paperwork Reduction Act in the paperwork Reduction Act	pted from anyone other than they in interest as shown by the min is estimated to take 0.2 how idual case. Any comments and to the Chief Information of NOT SEND FEES OR COMMENT OF THE STATE OR TO Box Issue Feat of 1995, no persons are recorded.	the applicant; a regeords of the Pate sure to complete. on the amount o Officer, Patent a OMPLETED FOR See, Assistant Control of the Assistant Control of the Assistant Control of the Assistant Control of the Assistant Con	te) /29/01 ristered attorent and Time will vof time requiand Tradem RMS TO Timmissioner	ary ared ark sils for			l 00000033 099	537707 640.00 @ 12.00 @	<u>.</u>